



New Non-Potable High Capacity Well Application Instructions for Completing New Form

This document provides basic instructions to those filling out the new non-potable high capacity well application. It highlights new features and key differences from the old form.

If you have any questions completing the new application, please contact the water use section at 608-266-2299 or dnrwateruserregistration@wisconsin.gov

Non-Potable High Capacity Well Approval Request
Form 3300-295 (R 5/14) Page 1 of 4

Return completed forms to:
State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Sanitewater—DWS
PO Box 7921, Madison, WI 53707-7921
20240602

Notes: Prior department approval is required for the construction, reconstruction or operation of a non-potable high capacity well or system of non-potable high capacity wells in accordance with Section NR 812.03(4)(a), Wis. Admin. Code. Use this form to request an approval for installation of a well or wells on a high capacity property or to modify a well on a high capacity property. Personally identifiable information collected will be used for administrative purposes and may be provided to requestors to the extent required by Wisconsin's Open Records law (s. 19.31-19.39, Wis. Stats.).

Applicant Information
Applicant (Name of Person and Title) _____ Company _____
Street Address _____ City _____ State _____ ZIP Code _____
Phone Number (include area and country) _____ Email Address _____

2. General Information
Owner (Name of Person and Title) _____
Street Address _____
Phone Number (include area) _____

3. Operator Information
Operator (Name of Person and Title) _____
Street Address _____
Phone Number (include area) _____

4. Submitter Purpose
Check all that apply:
☐ Install one or more
☐ Replace one or more
☐ Reconstruct one or more
☐ Are you aware of any existing well installations on the high capacity property that are out of compliance with Chapter NR 812.03(4)(a)?
☐ Renew a previous approval
Other, explain _____

5. Project Description
Provide a brief description _____

6. Required Enclosures
☐ Non-Potable High Cap
☐ Aerial or Plat Map well
License Required, if applicable _____

Non-Potable High Capacity Well Approval Request
Form 3300-295 (R 5/14) Page 3 of 4

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Notes: Prior department approval is required for the construction, reconstruction or operation of a non-potable high capacity well or system of non-potable high capacity wells in accordance with Section NR 812.03(4)(a), Wis. Admin. Code. Use this form to request an approval for installation of a well or wells on a high capacity property or to modify a well on a high capacity property. Personally identifiable information collected will be used for administrative purposes and may be provided to requestors to the extent required by Wisconsin's Open Records law (s. 19.31-19.39, Wis. Stats.).

Applicant Information
Applicant (Name of Person and Title) _____ Company _____
Street Address _____ City _____ State _____ ZIP Code _____
Phone Number (include area and country) _____ Email Address _____

Property Information
Property Owner's Name (Name of Person and Title) _____
County _____ Town _____ Range _____ Section _____ High Capacity Well File No. (if applicable) _____
Township/Range/Section: _____
Latitude: _____
Longitude: _____
Water Use Code (e.g. IR10): _____
Proposed Maximum Water Usage Per Day (in Gallons): _____
Proposed Maximum Water Usage Per Month (in Gallons): _____
Months of Operation (e.g. May - Sept): _____
Proposed Pump Type & Capacity (gpm): _____
Proposed Type of Well (e.g. Casing Seal, Private Adapter or Unit): _____
Proposed Location (Building Pressure, Tank, Pond, etc.): _____
Distance and Direction to Nearest Public Utility Well & Well Name: _____
Distance to Other Potential Contaminant Sources: _____

Well Construction
Drilling Method(s): _____
Anticipated rock/soil materials and depths that are expected during drilling:
Material and Depth Interval: from 0' to _____ from 0' to _____
Material and Depth Interval: from _____ to _____ from _____ to _____
Material and Depth Interval: from _____ to _____ from _____ to _____
Material and Depth Interval: from _____ to _____ from _____ to _____
Drillhole Diameter and Anticipated Depth Intervals:
Diameter and Depth Interval: from 0' to _____ from 0' to _____
Diameter and Depth Interval: from _____ to _____ from _____ to _____
Permanent Casing or Liner Material, if Used:
Diameter and Wall Thickness: " dia " thick from 0' to _____ " dia " thick from 0' to _____
Diameter and Wall Thickness: " dia " thick from _____ to _____ " dia " thick from _____ to _____
Diameter and Wall Thickness: " dia " thick from _____ to _____ " dia " thick from _____ to _____
Casing Material and Joints (Welded, Y and G, etc.): _____
Weight at Depth Interval: _____ from 0' to _____ from 0' to _____
Screen Material and Casing to Screen Joint (Welded, Y and G, K Pack, etc.): _____ from _____ to _____ from _____ to _____
Screen Size (in inches and depth interval or N/A if none): _____ from _____ to _____ from _____ to _____
Annular Space Material including Filter Material, if Used: _____ from _____ to _____ from _____ to _____
Material and Depth Interval: _____ from 0' to _____ from 0' to _____
Signature _____ Date _____
Signature _____ Date _____
Signature _____ Date _____

By signing this form, the person certifies that to the best of his or her knowledge, all information in the application is accurate and correct. Unsigned or incomplete applications will not be approved.



New Non-Potable High Capacity Well Application Overview of New Features

- The new application was designed to be shorter to fit needs of most non-potable hicap applications.
- Key Changes are:
 - All fields are required unless explanation is given.
 - It is a fillable PDF can be saved and emailed.
 - At the outset, payment and a paper copy of the application are still required to be sent by mail.
 - Emailed applications will be entered and put in queue upon receipt but will not be reviewed until fee is received.

The image displays three overlapping screenshots of the 'Non-Potable High Capacity Well Approval Request' form (Form 3320-205, R 5/14).

- Page 1 of 4:** Shows the top section with a header, return information, and a 'Non-Potable High Capacity Well Approval Request' title. It includes a 'Notes' section and a '1. General Information' section with fields for owner name, address, and phone number.
- Page 3 of 4:** Shows the '2. Operator Information' section, which includes fields for operator name, address, and phone number. It also includes a '3. Submitter Purpose' section with checkboxes for various reasons for the well.
- Page 4 of 4:** Shows the '4. Proposed Well Information' section, which includes a table for well location and usage, a table for well construction details (depth, diameter, etc.), and a signature section at the bottom.



New Non-Potable Hicap Application

Page One – Controls

- **Save** - When starting a new application, we recommend you save a version of each application for your records.
- **Print All** – Prints the entire document.
- **Print Second Part** – Prints only the second page.
- **Export raw data** – For DNR use.
- **Clear data** – clears entire form.

Save...	Print All	Print Second Part	Export Raw Data	Clear Data
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Return completed forms to:

State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Groundwater – DG&S
PO Box 7921, Madison, WI 53707-7921
dnr.wis.gov

**Non-Potable High Capacity Well
Approval Request**
Form 3300-295 (R 5/14) Page 1 of 4

Notice: Prior department approval is required for the construction, reconstruction or operation of a non-potable high capacity well or system of non-potable high capacity wells in accordance with Section NR 812.09(4)(a), Wis. Adm. Code. Use this form to request an approval for installation of a well or wells on a high capacity property or to modify a well on a high capacity property. Personally identifiable information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law (s.19.31-19.39, Wis. Stats.).

1. Applicant Information

Owner (Name of Person and Title)	Company



New Non-Potable Hicap Application

Page One – Applicant and Owner info

The first section is designed to obtain applicant, owner and operator information. This page contains personal information and will not be displayed online.

- **Applicant Information** –In most cases, this will be the property owner or well driller.
- **Owner Information** - The owner is the legal entity that owns the property on which the proposed well will be located.
 - *This information must match the ownership in county land records. If a transaction is pending or recently occurred, this should be noted in the additional project information.*
- **Operator Information** – this is the person or entity that will operate the well when it is completed.

Notice: Prior department approval is required for the construction, reconstruction or operation of non-potable high capacity wells in accordance with Section NR 812.09(4)(a), Wis. Adm. C. Installation of a well or wells on a high capacity property or to modify a well on a high capacity property will be used for administrative purposes and may be provided to requesters to the Department of Natural Resources (s.19.31-19.39, Wis. Stats.).

1. Applicant Information

Owner (Name of Person and Title)	Company
Street Address	City
Phone Number (include area code)	Fax Number
Email Address	

2. Owner Information (if different than applicant)

Owner (Name of Person and Title)	Company
Street Address	City
Phone Number (include area code)	Fax Number
Email Address	

3. Operator Information

Operator, if different than owner (Name of Person and Title)	Company
Street Address	City
Phone Number (include area code)	Fax Number
Email Address	

4. Submittal Purpose

(Check all that apply)



New Non-Potable Hicap Application

Page One – Purpose, Project and Enclosures

- **Purpose** – Check all that apply
- **Project Description** – describe project including any details that will help inform the review. For irrigation wells, the following must be included:
 - Planned crop rotation or irrigation use
 - Land acreage that will be irrigated
- **Required Enclosures** – All listed enclosures except variance request are required for application to be considered complete.

4. Submittal Purpose Check all that apply	
<input type="checkbox"/> Install one or more new wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Install one or more new wells with a capacity less than 70 gallons per minute on a high capacity	
<input type="checkbox"/> Replace one or more wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Replace one or more wells with a capacity less than 70 gallons per minute on a high capacity p	
<input type="checkbox"/> Reconstruct one or more wells with a capacity greater than 70 gallons per minute.	
<input type="checkbox"/> Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capac	
<input type="checkbox"/> Increase pumping rate in one or more wells to a rate greater than previously approved.	
<input type="checkbox"/> Renew a previous approval that has expired.	
<input type="checkbox"/> Other, explain	
5. Project Description Provide a brief description of the proposed project. Include number of acres and expected crop rotation	
6. Required Enclosures	
<input type="checkbox"/> Non-Potable High Capacity Well Application Form.	<input type="checkbox"/> \$500 application fee (See s. 2
<input type="checkbox"/> Aerial or Plat Map with property boundaries outlined.	<input type="checkbox"/> Well Construction Reports (if a
<input type="checkbox"/> Variance Request, if needed (Form 3300-210)	



New Non-Potable Hicap Application

Page Two

The second page is intentionally left blank to allow it to be separated from the remaining part of the application that will be posted online.

Non-Potable High Capacity Well
Approval Request
Form 3300-285 (R 5/14) Page 2 of 4

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New Non-Potable Hicap Application

Page Three – General Information


- **Applicant** – This is the person that will sign the form and who should be contacted with questions regarding the proposed well construction or water withdrawal.
- **Property information** – Owner and general location of the proposed well. If the well is already a high capacity property, include the file number. If you do not know this number, contact DNR staff at 608-266-2299 or dnrwateruserregistration@wisconsin.gov
- **Landfills** – If the proposed well is located within 1200 feet of a landfill, note the location of the landfill.
- **Non-compliant wells** – If the applicant is aware that there is a non-compliant well located on the property, this box must be checked and details must be attached.

Applicant Information					
Application Prepared By (Name and Title)				Company	
Property Information					
Property owner, if different than applicant (Name of Person and Title)				Company	
County	Town	Range	<input type="radio"/> East <input type="radio"/> West	Section	High Capacity Well File No. (if applicable)
	N				
Yes No					
<input type="radio"/> <input type="radio"/> Is a proposed well within 1,200 feet of a landfill? Landfill location: (Township/Range/Section): T R S					
<input type="radio"/> <input type="radio"/> Are you aware of any existing well installations on the high capacity property that are out of compliance with Chapter NR 812, Wisconsin Administrative Code? If yes, please attach a description of the non-complying wells.					



New Non-Potable Hicap Application

Page Three – General Information

- **Existing Well Information** – All existing wells must be listed on the application. Applications are not considered complete unless all wells are listed.
 - **Well Name** – How the owner references this well i.e. house well, irrigation well #3, calf barn well, etc...
 - **Water Use Code** – Select the main use of the well from the check down list. If there are multiple uses for a well, choose the one that uses the most water per year.
 - **High capacity well number** – if the well is on an existing high capacity property, it should already have a hicap number.
 - **Pump Capacity** – Pump capacity of the existing well in gallons per minute.
 - **Coordinates** – enter the latitude and longitude of the well. Decimal degree (e.g. 45.12345) format is preferred, but other formats are acceptable. (e.g. 45 7.407' or 45 7' 24")
 - **WUWN or WCR Image File number** – These can be found on the [DNR](#) or [DATCP](#) websites. These may not be available for all wells.
 - If you need more space, more fields can be added by clicking the 

Existing Well Information

Enter the following information for all existing wells on the property and any contiguous property owned by the applicant.
 Note: Applications are not complete unless they specify water use, pump capacities and GPS locations of existing wells.

Well Name and/or Number assigned by Owner	Water Use Code(s)	High Capacity Well Number	Pump Capacity (gpm)	Existing Well Coordinates Decimal Degrees Preferred (e.g. 45.1234, -89.1234)		WUWN or WCR Image File # (if known)
				Latitude	Longitude	

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New Non-Potable Hicap Application

Page Three – Additional Information

- **Additional Project Information** – This section provides the opportunity for the applicant to describe any additional information relevant to the proposed well construction. This may include:
 - Wells that will be abandoned following construction of the new well.
 - Property ownership issues or pending changes.
 - Non-standard construction methods.
 - Additional information that cannot be addressed in space provided in the form.

Additional Project Information

Please include any additional relevant information regarding this project such as existing wells to be abandoned, proposed non-standard construction methods or pending ownership changes.



New Non-Potable Hicap Application

Page Four– Proposed Well Information


- **Well Location and Usage**– Room is provided for two proposed wells. If more wells are proposed, create an additional application.
- **Coordinates** – enter the latitude and longitude of the well. Decimal degree (e.g. 45.12345) format is preferred, but others can be used at this time. (e.g. 45 7.407' or 45 7' 24")
- **Water Use Code** – Select the main use of the well from the check down list. If there are multiple uses for a well, choose the one that uses the most water per year.
- **Requested Water Volumes** – In the appropriate fields, enter the proposed pump capacity, the maximum daily use and maximum monthly use for the proposed source. Average use is no longer requested.

Proposed Well Information					
Enter the following information for all proposed wells on the property. If more than two wells, create additional applications.					
Well Location and Usage					
Well Name Assigned by Well Owner (North Well, etc.):					
Town/Range/Section:	¼	¼	S	T	R
Latitude :					
Longitude:					
Water Use Code (e.g. IR10):	▼				
Proposed Maximum Water Usage Per Day in Gallons:					
Proposed Maximum Water Usage Per Month in Gallons:					
Months of Operation (e.g. May - Sept):					
Proposed Pump Type & Capacity(gpm):					
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):					
Discharge Location (Building Pressure Tank, Pond, etc.):					
Distance and Direction to Nearest Public Utility Well & Well Name:					
Distance to Other Potential Contaminant Sources:					
Well Construction					



New Non-Potable Hicap Application

Page Four– Proposed Well Information

- **Well Construction**– Select drilling method from drop-down list. If using an alternative method, describe the method in additional project information on page 3.
- **Material and depth** – Enter anticipated materials and depths. For more rows, click the plus icon .
- **Drillhole Diameter and Anticipated Depth Intervals**– For additional diameters, include a description of drillhole sizes and depths in additional project information on page 3.

Well Construction				
Drilling Method(s) (Rotary, Percussion, Etc.):				
Anticipated Geological Materials and Depths that are expected during drilling:				
Material and Depth Interval:		from	0	' to '
Material and Depth Interval:		from		' to '
Material and Depth Interval:		from		' to '
Material and Depth Interval:		from		' to '
Drillhole Diameter and Anticipated Depth Intervals:				
Diameter and Depth Interval:		from	0	' to '
Diameter and Depth Interval:		from		' to '
Permanent Casing or Liner Material, If Used:				
- Diameter and Wall Thickness	" dia	" thick	from 0	' to '
- Diameter and Wall Thickness	" dia	" thick	from	' to '
- Diameter and Wall Thickness	" dia	" thick	from	' to '
Casing Material and Joints (Welded, T and C, etc.):				
Weight at Depth Interval	lbs/foot	0	' to '	
Weight at Depth Interval	lbs/foot		' to '	
Screen Material and Casing to Screen Joint (Welded, T and C, K Packer, etc.)				
Screen Slot Size In Inches and Depth Interval or N/A, if none:		from		' to '
Annular Space Material Including Filter Pack Material, If Used:				
Material and Depth Interval:		/	0	' to '



New Non-Potable Hicap Application

Page Four– Signature

- **Name and Signature** - This person is responsible for certifying that the information in the application is accurate and correct to the best of their knowledge.
- **Owner or Agent** - The application can be signed by the owner or an agent of the owner. Check the appropriate box.

Applicant Signature		
Name – Print		Select One:
		<input type="radio"/> Owner <input type="radio"/> Agent of Owner
Signature	Company	Date
By signing this form, the person certifies that to the best of his or her knowledge, all information in the application is accurate and correct. Unsigned or incomplete applications will not be approved.		



- Note: Applications will be entered and put in queue for review when received by email. However, review will not take place until the application fee has been received and processed.

06/11/2014



New Non-Potable Hicap Application Determination of Completeness

- All fields are required.
- Ownership must be correct.
- Coordinates of proposed well must match location given on attached map or aerial photo.
- All existing wells must be listed with coordinates.
- \$500 application fee must be received before review will begin.

Non-Potable High Capacity Well Approval Request
Form 3320-205 (R 5/14) Page 1 of 4

Return completed forms to:
State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Sanitewater—DWS
PO Box 7921, Madison, WI 53707-7921

Applicant Information
Owner (Name of Person and Title) _____
Street Address _____ City _____ State _____ ZIP Code _____
Phone Number (include area code) _____ Email Address _____

2. General Information
Owner (Name of Person and Title) _____
Street Address _____
Phone Number (include area code) _____

3. Operator Information
Operator (Name of Person and Title) _____
Street Address _____
Phone Number (include area code) _____

4. Submitter Purpose
Check all that apply:
☐ Install one or more
☐ Replace one or more
☐ Reconstruct one or more
☐ Increase pumping or
☐ Renew a previous application
☐ Other, explain _____

5. Project Description
Provide a brief description _____

6. Required Enclosures
☐ Non-Potable High Cap
☐ Aerial or Plot Map with
Location Request, if applicable

Non-Potable High Capacity Well Approval Request
Form 3320-205 (R 5/14) Page 3 of 4

Return completed forms to:
State of Wisconsin, Department of Natural Resources
Bureau of Drinking Water & Sanitewater—DWS
PO Box 7921, Madison, WI 53707-7921

Applicant Information
Owner (Name of Person and Title) _____
Street Address _____
Phone Number (include area code) _____

Property Information
Property Owner's Name (Name of Person and Title) _____
County _____ Town _____ Range _____ Section _____ High Capacity Well File No. (if applicable) _____

Is a proposed well within 1,200 feet of a land? Land's location: (Township/Range/Section): T _____ R _____ S _____

Existing Well
Enter the following:
Note: Applicant _____

Well Name and Number assigned

Proposed Well Information
Enter the following information for all proposed wells on the property. If more than two wells or alternate construction, submit additional sheets.

Well Location and Usage	North Well, etc.				South Well, etc.			
Town/Range/Section:	T	R	S	T	R	S	T	R
Latitude:								
Longitude:								
Water Use Code (e.g. R110):								
Proposed Maximum Water Usage Per Day (in Gallons):								
Proposed Maximum Water Usage Per Month (in Gallons):								
Months of Operation (e.g. May - Sept):								
Proposed Pump Type & Capacity (gpm):								
Proposed Type of Well or Casing Size:								
Proposed Adapter or Liner:								
Proposed Location (Building Pressure, Tank, Pond, etc.):								
Distance and Direction to Nearest Public Utility Well & Well Name:								
Distance to Other Potential Contaminant Sources:								

Well Construction
Drilling Method(s): _____
Anticipated obstructions, materials and depths that are expected during drilling:

Material and Depth Interval:	from	to	from	to
Material and Depth Interval:	from	to	from	to
Material and Depth Interval:	from	to	from	to
Material and Depth Interval:	from	to	from	to

Drillhole Diameter and Anticipated Depth Intervals:

Diameter and Depth Interval:	from	to	from	to
Diameter and Depth Interval:	from	to	from	to

Permanent Casing or Liner Material, if Used:

(Diameter and Wall Thickness)	" dia "	thick from	" dia "	thick from
(Diameter and Wall Thickness)	" dia " <td>thick from</td> <td>" dia " <td>thick from</td> </td>	thick from	" dia " <td>thick from</td>	thick from
(Diameter and Wall Thickness)	" dia " <td>thick from</td> <td>" dia " <td>thick from</td> </td>	thick from	" dia " <td>thick from</td>	thick from

Casing Material and Joints (Welded, Y and C, etc.):

Weight at Depth Interval:	test/foot	0 "	test/foot	0 "
Weight at Depth Interval:	test/foot	0 "	test/foot	0 "

Screen Material and Casing to Screen Joint (Welded, Y and C, K Pack, etc.):

Screen Test Size (in inches and depth interval or N/A if none):	from	to	from	to
Screen Test Size (in inches and depth interval or N/A if none):	from <td>to</td> <td>from <td>to</td> </td>	to	from <td>to</td>	to

Anticipated Spacing Material including Filter Pack Material, if Used:

Material and Depth Interval:	from	to	from	to
Material and Depth Interval:	from <td>to</td> <td>from <td>to</td> </td>	to	from <td>to</td>	to

Signature
Name: _____ Signature: _____
Owner: ☐ Owner ☐ Agent of Owner
Company: _____ Date: _____

By signing this form, the person certifies that to the best of his or her knowledge, all information in the application is accurate and correct. Unsigned or incomplete applications will not be approved.